State FFA Officer Pre-Chapter Visit Information

School:	Address:	
Advisor(s):		
School Phone:		
Date of Visit:		
Directions to School:		
What are your class and SAE requirements to		
What classes and grade levels will I be presen		
What is your time frame for your classes? Do		
	c areas/topics you would like for me to cover?	
Is there a need for an additional officer to help	p with your chapter visit?	
Do you have any students enrolled in more th	an one class? If so, how many times?	
Are there any additional people you would lik administrators, alumni, media, etc?	ke me to visit with, such as principals, counselors, teachers	
What other things would you like me to do du	uring your chapter visit?	

Chapter FFA Banquet Information

Would you like me to attend your FFA banquet?	YES	No, thank you.
IF YES: Time and Date of Banquet:		
What responsibilities would I have at your banque		
Contact Person:	Phone:	
Other In	nformation	
Would you like your chapter president to receive n	ny newsletter?	YesNo
Are there any additional events you would like for (meetings, fun activities, workshops, paren		list with the date below.
During the school year would you like me or a gro leadership development type workshop, assembly visit? (This would be the chapter's expense) Briefly describe what you would like and when:	or program at your sc	hool beyond a regular chapter
Is it ok for me to contact you at home if I cannot re (In case I miss you at school and I am conf	each you at school?	
Yes, it's ok No, I would prefer if wo	ould not call me at hor	me.
IF YES: Home Phone	Please call b	efore:
Any other questions, comments, or concerns?		

Thank you for taking the time to fill this out.

This helps to make my service to your chapter more effective.

I am looking forward to working with you this year!